



GUARDIAN OF PUBLIC HEALTH UPDATE

May 6, 2011

Preparedness and Planning

The Community Assessment Tool (CAT)

CAT is intended for use by a community to assess its readiness for a disaster from a total healthcare system perspective. This system perspective includes a complete network of agencies, facilities, and all providers of healthcare in a specified geographic area (such as 9-1-1, EMS, hospitals, urgent and primary care to include pediatrics, home health, long term care, hospice, mortuary services, public health, emergency management, local government and veterans hospitals). The CAT helps reveal each core agency partners' (sectors) capabilities and resources, and highlights cases of the same vendors being used for resource supplies (e.g., personal protective equipment [PPE], ventilators, and oxygen) by the partners (e.g., public health departments, clinics, or hospitals). The CAT also addresses gaps in the community's capabilities or potential shortages in resources. Subject matter experts from each sector assisted in developing and reviewing this tool.

Federal Preparedness Advisers Approve Disaster Research Recommendations

A federal advisory board meeting in Washington, DC, approved a set of recommendations that would help mobilize the scientific response in the wake of major public health events such as the 2009 H1N1 pandemic and the Deepwater Horizon oil spill. The group said in its executive summary that scientific investigations, along with preplanning for scientific work, should be fully integrated into disaster planning and response to ensure that critical knowledge gaps are addressed in a timely way.

DHS Strategy for Improving the National Response & Recovery from an Improvised Nuclear Device Attack

U.S. officials say the nation's health system is ill prepared to cope with a catastrophic release of radiation, despite years of focus on the possibility of a terrorist dirty bomb or an improvised nuclear device attack. A blunt assessment circulating among American officials says, "Current capabilities can only handle a few radiation injuries at any one time." That assessment prepared by the Department of Homeland Security in 2010, although available on the website is "For Official Use Only," says "there is no strategy for notifying the public in real time of recommendations on shelter or evacuation priorities." The Homeland Security report, plus several other reports and interviews with almost two dozen experts inside and outside the government, reveals other gaps that may increase the risks posed by a nuclear accident or terrorist attack.

News

Japan to Launch Massive Search for Quake Bodies

Japan, 24,800 soldiers, accompanied by divers are being sent into the tsunami disaster areas to search for and recover the thousands of bodies still lying on the ground or buried under debris; 14,300 are confirmed dead and 14,000 are still missing but presumed dead. The naval component of the search operation will search the water up to twenty miles off shore. Veterinarians will search for sick and dying animals. The Japanese government has announced a 4 trillion yen (\$48.9 billion) emergency budget for disaster relief stating it would cost as much as 25 trillion yen to rebuild the areas devastated in the disaster.

Short-Term and Long-Term Health Risks of Nuclear-Power-Plant Accidents

A review article published in the New England Journal of Medicine discusses the health risks of radiation exposure due to nuclear power plant accidents. They argue because nuclear accidents are rare events, many clinicians are not familiar with radiation exposure injury and illness. They suggest that medical facilities that are located near nuclear power plants create plans for handling radiation exposure patients. They should also practice and update these plans regularly to be better prepared in case of a nuclear accident.

Table of Contents...

Preparedness and Planning	1
Surveillance	3
Pandemic Planning	3
Regional News	4
Training & Education	4

Read the Next *Guardian* Issue!
May 20, 2011

Access and Functional Need Evacuation Planning Toolkit DVD

Communities throughout the country continue to wrestle with the complex issues of how to effectively transport people with access and functional needs during critical incidents. The California Emergency Management Agency (Cal EMA) Office for Access and Functional Needs has [released planning guidance](#) on this issue. This guidance provides an introduction to some of the important issues to consider while planning for a large scale evacuation and provides some valuable tools to make the job a little bit easier.

FDA Strategic Plan Promises New Food Safety Approaches

A five-year strategic plan released by the US Food and Drug Administration (FDA) promises new approaches to food safety in line with new legislation and increased efforts to smooth the regulatory pathway for medical defenses against biological and other unconventional attacks. The [58-page report](#) describes in broad terms how the FDA hopes to carry out its expanding mission over the next five years. Because of globalization and technological advances, the FDA's job today is "fundamentally different—and far more complex—than it was even a few years ago," the report notes. The agency pledges it will fulfill its mission by "embracing innovation and actively pursuing partnerships with federal, state, and local agencies; international authorities; academia; non-government organizations; and the public sector." The report emphasizes the huge increases in the flow of imported food, drugs, and cosmetics in the past decade. In 2010, more than 20 million import lines of products arrived in the United States, more than three times as many as 10 years ago. More than 300,000 facilities in 150-plus countries send products to the nation's roughly 300 ports of entry.

Putting Down Roots in Earthquake Country - Handbook for Central US

This [handbook](#) provides information to residents of the Central United States about the threat of earthquakes in that area, particularly along the New Madrid seismic zone, and explains how to prepare for, survive, and recover from such events. Additional earthquake preparedness information and resources are available at EarthquakeCountry.info.

New Presidential Policy Moves Preparedness Activities to Streamlined Approach

The U.S. federal government is aiming to move preparedness activities away from overly burdensome requirements to a more streamlined approach with the release of a new policy. President Barack Obama signed a new presidential [policy directive on national preparedness](#) on March 30th, which is the result of a comprehensive review of national preparedness policy and replaces Homeland Security Presidential Directive 8. Emergency Management reports that Brian Kamoie, Senior Director for Preparedness Policy on the White House National Security Staff, told a group of stakeholders at the George Washington University Homeland Security Policy Institute on April 8th that many incidents were examined during the directive's development, including the 2009 H1N1 pandemic, the Gulf of Mexico oil spill in 2010, as well as Hurricane Katrina. The federal government included twenty-four national associations representing a range of stakeholders and disciplines in the review of the national preparedness policy. Kamoie emphasized that the directive seeks to move away from burdensome requirements and instead build the key capabilities the nation needs to confront any challenge.

Surveillance

A Call for Action: The Application of the International Health Regulations to the Global Threat of Antimicrobial Resistance

In a [Policy Forum](#) article in PLoS Medicine, Didier Wernli and colleagues argue that the International Health Regulations (IHR) should be applied to the global health threat of antimicrobial resistance. According to the authors, "The IHR provides a legal framework for international efforts to contain the risk from public health threats that may spread between countries, including surveillance and global alerts." The authors cite that antimicrobial resistance is an urgent public health issue that requires swift action. They argue that the use of IHR could improve the response to developing resistant organisms.

Pandemic Planning

LA Officials Say Modeling Enhanced Their Response to H1N1 Pandemic

A mathematical model that was originally designed for an influenza pandemic sparked by the avian H5N1 virus helped Los Angeles County public health officials make predictions about the course of the 2009 H1N1 pandemic and mount an appropriate response, [according to a report](#) in the American Journal of Epidemiology. The county's Department of Public Health (DPH) launched a collaboration with modeling specialists at the University of Washington's Fred Hutchinson Cancer Research Center (FHCRC) in 2007 to plan for a flu pandemic. When the H1N1 virus emerged in 2009, the group adapted the model to the H1N1 situation. The authors say their model enabled them to (1) project the timing and magnitude of the epidemic in Los Angeles County and nationwide, (2) predict the effects of the pandemic vaccination campaign locally and nationwide, and (3) "predict that a third wave of pandemic influenza in the winter or spring of 2010 was unlikely to occur." This helped the DPH mount a "measured and appropriate response" to the pandemic and set reasonable goals for mitigation. Using the model, the authors also estimated that if the pandemic vaccine had arrived in September 2009 instead of October, 2,700 deaths nationwide could have been prevented. "We believe that our simulation-based approach to influenza pandemic guidance in LA County is general enough to apply to much of the United States," they write.

Recovery from H1N1 Imparts Increased Resistance to Multiple Strains

People who recover from H1N1 flu may be left with an extraordinary natural ability to fight off flu viruses, [findings suggest](#). In beating a bout of H1N1, the body makes antibodies that can kill many other flu strains, a study in the Journal of Experimental Medicine shows. Doctors hope to harness this power to make a universal flu vaccine that would protect against any type of influenza. Many scientists are already testing different prototypes to put an end to the yearly race to predict coming flu strains and quickly mass produce a new vaccine each flu season. In the nine patients they studied who had caught H1N1 flu during the pandemic, they found the infection had triggered the production of a wide range of antibodies that are only very rarely seen after seasonal flu infections or flu vaccination. Five antibodies isolated by the team could fight all the seasonal H1N1 flu strains from the last decade, the devastating flu strain from 1918 that killed up to 50 million people, plus a potentially deadly bird flu H5N1 strain.

Pre-Admission Statin Use and In-Hospital Severity of 2009 Pandemic Influenza A(H1N1) Disease

Researchers in PLoS One examine the contradictory evidence on statin effects on infections including H1N1. They analyzed United Kingdom Influenza Clinical Information Network database hospital patient data from between April 2009 and January 2010. They utilized data from patients over 34 years old and highlighted their statin usage before hospital admission. The [data showed](#) that statin use did not have a significant effect on severity of H1N1 illness.

Regional News

Region 3 Sponsors Multiple Technical Training Events

The Region 3 Healthcare Coalition has held three separate 800 MHz radio user trainings to help strengthen communication lines between partner agencies and emergency response agencies. The courses were held in Midland, West Branch, and Cass City during February and March. Over 80 participants from various professional backgrounds attended the trainings including hospitals, public health, EMS, safety officers, law enforcement, and fire & rescue. Prior to completing the training 70% of participants indicated a low proficiency in operating 800 MHz radios; many of whom had access to the radios for several years. The trainer for the courses Rick Dupon, EMT-P, explained the basic concepts of how the 800 MHz system works before providing an interactive, hands-on training in which participants learned to successfully change zones, select a talk group, perform a site scan, activate an emergency alert, initiate a private call, and return to the home channel using the radios.

A training for Region 3's Long Term Care (LTC) partners was held on February 8th at the Lincoln Center in Bay City. The training focused on web-based systems that will be an expected part of LTC agencies' emergency preparedness and response capabilities. The session began with an introduction to the EMResource reporting website by Region 3 Coordinator, Jim Brasseur. [EMResource](#) is a critical tool for medical surge planning and is used by healthcare facilities across the State Of Michigan to report on available bed status. Next, an overview of the [Michigan Health Alert Network \(MIHAN\)](#) was provided by the MIHAN Project Coordinator, Craig Henry. The MIHAN is an alerting system used to provide situational awareness and emergency notification to first responders. LTC agencies in the region were encouraged to take advantage of the laptop computers that the healthcare coalition has to offer to make it easier to access and regularly utilize these important systems.

The Region 3 Healthcare Coalition has also completed hosting another Society of Critical Care Medicine "Fundamentals in Disaster Management" course at Covenant Healthcare. This was the second FDM course that Region 3 has hosted and over 20 providers were trained. Region 3 is the only site in Michigan licensed to provide these courses which are targeted toward hospital trauma and critical care providers.

Training & Education

CDC's Training and Continuing Education (TCE) Online

The Centers for Disease Control and Prevention's TCE website offers [CE-accredited courses](#) for both public health professionals and clinicians at no charge.

Building Partnerships in Financial Preparedness

The FEMA Individual and Community Preparedness Division partnered with Operation Hope to co-host a [webinar about grassroots best practices](#) in promoting financial emergency preparedness. The May 3, 2011 webinar explained how community organizations, faithbased organizations, emergency managers, Citizen Corps Councils, CERTs, the general public, and other organizations can leverage community resources in partnership with Operation HOPE before, during and after disasters. This includes ideas to encourage the use of tools such as the [Emergency Financial First Aid Kit \(EFFAK\)](#) and the [Ready Business Emergency Plan](#) to help organizations and families be financially prepared.

NEHA e-Learning

National Environmental Health Association (NEHA) offers more than 100 hours of training and education within [11 environmental health tracks](#) at no charge for NEHA members; they are also available to non-members for a fee. Free CE credits are also offered.

Date/Time	Event	Location
May 10, 2011	International Crisis & Risk Communication Conference (ICRC) This conference will discuss best practices in crisis communication as well as new avenues for communication, the growing role of Social Media and the internal struggles that crisis communicators face with suggestions for overcoming them. Experts speakers include current and former top executives from some of the most prominent organizations throughout the world and leading scholars from the top research universities, including those from the Centers for Disease Control (CDC), Federal Emergency Management Agency (FEMA), U.S. Coast Guard, BP, Walt Disney World, AirTran Airways and the U.S. Department of Homeland Security.	Orlando, FL
May 12, 2011	2011 EMS Summit This three-day conference provides excellent information and training opportunities for pre-hospital providers. There are over 20 credits available, including specialty credits. Visit the Huron-Sanilac EMS network website for more information including agenda, speaker bios, and registration details.	Bavarian Inn Lodge Frankenmuth, MI
May 19, 2011	Cornerstones in Preparedness This year the conference will be focused on Critical Infrastructure protection, Continuity of Operations Planning and Decontamination training. Participants will also learn about the resources and assistance available to health care providers through the Region 3 Healthcare Preparedness Network, including State and Federal assets. Visit the Region 3 website to register. Please contact Region 3 with any questions at 989-758-3713.	Dow Event Center Saginaw, MI
May 16, 2011	FEMA National Level Exercise 2011 NLE 2011 will simulate the catastrophic nature of a major earthquake in the central United States region of the New Madrid Seismic Zone (NMSZ). The year 2011 is the bicentennial anniversary of the 1811 New Madrid earthquake, for which the NMSZ is named. NLE 2011 will be the first NLE to simulate a natural hazard.	

Date/Time	Event	Location
May 25, 2011	Communicable Disease Conference <u>This conference</u> seeks to provide the latest knowledge on communicable disease diagnosis, surveillance, reporting, laboratory test interpretation, and incorporation of epidemiologic principals. The target audience includes communicable disease nurses, epidemiologists, medical officers, health officers, infection control professionals, environmental health specialists, physicians, or any other health professional interested in communicable diseases.	Doubletree Hotel Bay City, MI
May 25, 2011 12:00 PM - 4:00 PM	Speak Up! The 2011 Virtual Immunization Symposium A virtual conference where health professionals and communicators can listen and interact with presentations featuring nationally renowned speakers, advocates, coalition leaders and communicators. Visit www.vicnetwork.org for more information and to register for the event!	Online
May 26, 2011 3:00 PM - 4:00 PM	WaterISAC EPA's Webinar on the Tabletop Exercise Tool for Water Systems Join WaterISAC and representatives from the United States Environmental Protection Agency for <u>two important training webinars</u> on the Agency's new Tabletop Exercise Tool for Water Systems: Emergency Preparedness, Response, and Climate Resiliency (TTX Tool). The TTX Tool contains materials that assist in planning and facilitating tabletop exercises that focus on Water Sector-related issues.	Online
Jun 7, 2011	2011 Rural and Ready Conference: All Walks of Life Topics to be covered at this years conference include Public Safety, Cyber Security, Mental Health, Self Sufficient Planning, the Strategic National Stockpile, and Crisis Prevention-Infectious Disease. Registration is available through the Chippewa County Health Department's website . Registration fee is \$15.	Kewadin Casino and Resort Sault Ste Marie, MI
Jun 7, 2011	REAC/TS Course: Radiation Emergency Medicine (ORISE) This <u>3½-day classroom course</u> is intended for physicians, nurses, nurse practitioners and physician assistants who may be called upon to provide emergency medical care following a radiological or nuclear incident. Priority registration will be given to these groups of professionals. This course may also be relevant for paramedic instructors but is generally not intended for prehospital responders.	Oak Ridge, TN
Jun 8, 2011	Michigan Specific Advanced Disaster Life Support Instructor Course <u>This course</u> will present information and materials to prepare the successful participant to become a strong member of the Michigan National Disaster Life Support Training Programs. Prior completion of Basic Disaster Life Support and Advanced Disaster Life Support courses and approval of your Regional Healthcare Coalition Coordinator are required to attend. Anyone interested in attending the NDLS Instructor course should contact Stu Myers and briefly describe past training/instructor experience, current Michigan medical license type, and the emergency preparedness /response role they play within their home region. Class size is limited and meeting the NDLS instructor needs of the eight Michigan regions will be a priority in determining student acceptance.	MDCH OPHP Offices Lansing, MI

Date/Time	Event	Location
Jun 10, 2011	Advanced Disaster Life Support Course for Statewide Participation An intensive, <u>2-day course</u> that allows students to demonstrate competencies in casualty decontamination, specified essential skills, and mass casualty incident information systems/technology applications. Using simulated, all-hazards scenarios and mass causality incidents, ADLS makes use of four interactive sessions in which participants treat simulated patients in various disaster drills and situations. Training is focused on the development of hands-on skills to allow participants to apply the knowledge learned in BDLS. Prior completion of the Basic Disaster Life Support course and approval of your Regional Healthcare Coalition Coordinator are required to attend. Lodging and food will be provided at no cost to attendees. Anyone interested in attending this course should contact <u>Stu Myers</u> .	Fort Custer Educational Center (FCEC), Fort Custer Training Center, Michigan
Jun 19, 2011	21st World Conference on Disaster Management This year's <u>conference</u> will bring emergency response and management delegates from over 40 countries. The WCDM offers a program that challenges delegates by examining traditional concepts and methods, and provides: new ideas and approaches to problem solving; both leading edge and topical presentations; opportunities to connect with key individuals and organizations across the disaster management spectrum.	Metro Convention Center Toronto, CANADA
Jul 6, 2011	2011 Chemical Security Summit The <u>fifth annual summit</u> will provide a forum for representatives from the chemical community to exchange information and network with other security professionals, to share best practices, to find out about chemical security regulations, and to gain insight into the roles of state, local, and federal agencies and departments involved in chemical security.	Baltimore, MD



Mailing Address:
 Office of Public Health Preparedness
 Capitol View Building - 201 Townsend Street - Lansing, MI 48913
 (517) 335-8150 — <http://www.michigan.gov/ophp>



This publication is supported by Cooperative Agreement Number 5U90/TP517018-09 from the Centers for Disease Control and Prevention (CDC). Its contents are solely the responsibility of the authors and do not necessarily represent the official views of CDC.